



Alabama Board of Nursing

Strategies in Recruitment and Staffing for the Modern Nursing Workforce

Current workforce data reflects what nursing employers and regulators have known for years – the nursing workforce is aging. Staffing shortages no longer loom as a future threat; they are the reality for today's healthcare employers and patients. Below is a brief list of strategies for recruitment and optimization of qualified, but often underutilized, human resources.

Entice older workforce to return:

1. Explore flexible shifts and schedules, such as 4-6 hour shifts for nurses over 55 (example: 11AM to 3PM and 4PM to 7PM), to assist and provide relief to current staff. Clearly define role and duties, to address potential individual limitations.
2. Consider redesign of job descriptions, to allow the older workforce to provide required supervision to the Medication Assistant Certified (MAC) and Nursing Student Aides. These unlicensed personnel may have an expanded role in facilities, under the supervision of licensed professionals. Experienced nurses are excellent candidates for this less physically demanding duty.
3. Create pay incentives, including reimbursement for licensure and certification fees.
4. Consider employing older nurses on specific care teams (see below).
5. Reward experience in compensation.

Nursing Students

1. Hire student nurse aides and allow them to assist the current nursing staff
2. Consider nursing student externships. Not only do you get assistance for the nursing staff but you provide valuable training and education, including clinical rotations to the student nurse.

Nursing Assistants and PCTs Transitioning to Medication Assistant Certified (MAC)

1. Encourage nursing assistants and patient care technicians to pursue certification under the Medication Assistant, Certified (MAC) program administered by the ABN (the Alabama Community College System may be able to provide on-site training).
2. Hire MACs and pay for their training (CNA certification is not required) and certification.

Other Ideas

1. Specific patient care teams: create patient admission or similarly specialized teams, to travel unit to unit to decrease the stress on current staff and reduce unit workload.



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2. Create non-nurse rounding teams over several units, to assist the patients and handle incidentals, providing relief to nursing staff by performing for simple tasks that do not require licensure.
3. Establish break relief teams in ICU and/or Med/Surg to facilitate staff breaks.
4. Create Nursing Assistant/Student Nurse Aide turning teams for patients.
5. Incentivize referrals for hire.
6. Hire clinical instructors to work part-time or hourly shifts.
7. Consider revitalizing old staffing plans (ex: 7/7 and Baylor), as well as incentivizing return to practice by retired or lapsed nurses.
8. Call applicants immediately for interviews (create a rapid interview team) and consider virtual interviews.
9. Compensate accordingly; shift bonuses are great, are unsustainable as a long-term solution.
10. Make the job about work/life balance; create plans that encourage and support older nurses returning to practice.
11. Utilize experienced nurses working reduced hours to manage coordination of care for the patients assigned to particular unit(s), freeing nursing staff to remain at the bedside.
12. Consider older nurses for preceptor roles.

ABN Resources for Employers

[Employer Resource Page](#)

[MAC and Student Nurse Rules \(ABN Administrative Code §§610-X-7-.11 and 610-X-7-.12\)](#)